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42015 7990 03/16/2005

POTOMAC PATENT GROUP PLLC  
P. O. BOX 835  
MCLEAN, VA 22101

06/15/2005 CNGUYEN1 00000082 09852114

01 FC:1501 1400.00 OP  
02 FC:1504 300.00 OP

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Michael G. Savage

(Signature)

June 15, 2005

(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/23,114	05/09/2001	Jacobus Haarsten	040071-283	5015

TITLE OF INVENTION: METHOD AND APPARATUS FOR MANAGING TRAFFIC FLOWS

APPL. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$1700	06/16/2005

EXAMINER	ART UNIT	CLASS-SUBCLASS
VINCENT, DAVID ROBERT	2661	370-473000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

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☐ "Fee Address" indication (or "Fee Address" indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,

(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Telefonaktiebolaget L M Ericsson (publ)

Stockholm, Sweden

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

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- ☒ Issue Fee  
☒ Publication Fee (No small entity discount permitted)  
☐ Advance Order - # of Copies \_\_\_\_\_

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☐ A check in the amount of the fee(s) is enclosed.☒ Payment by credit card. Form PTO-2038 is attached.☒ The Director is hereby authorized by charge card number \_\_\_\_\_, or credit any overpayment Deposit Account Number \_\_\_\_\_ 50-2476 (enclose on same copy of this form).

5. Change in Entity Status (from status indicated above)

☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(e)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant, a registered attorney or agent, or the assignee or other party interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature

Michael G. Savage

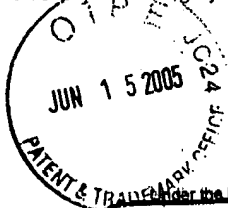
Date June 15, 2005

Registration No. 32,596

Typed or printed name

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**TRANSMITTAL  
FORM**

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

4

Application Number	09/852,114
Filing Date	05/09/2001
First Named Inventor	Jacobus Haartsen
Art Unit	2661
Examiner Name	David R. Vincent
Attorney Docket Number	0119-007

**ENCLOSURES (Check all that apply)**

<input type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> PTO-2038 for Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers  <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):  <b>Part B - Fee(s) Transmittal (in duplicate)</b>
<b>Remarks</b>  By facsimile to 1 703 746 4000		

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

Firm Name	Potomac Patent Group PLLC, P.O. Box 855, McLean, Virginia 22101-0855		
Signature	<i>Michael G. Savage</i>		
Printed name	Michael G. Savage		
Date	June 15, 2005	Reg. No.	32,596

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Signature	<i>Michael G. Savage</i>		
Typed or printed name	Michael G. Savage	Date	June 15, 2005

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